Effective on 12/09/2004									
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known				
FEE TRANSMITTAL					Application Number 09/937,460				
					Date	12/28/2001			
For FY 2009					First Named Inventor Pieter T. Koopman				
Applicant claims small entity status. See 37 CFR 1.27					ner Name	Shawn S	Shawn S. An		
					Art Unit 2621				
TOTAL AMOUNT OF PAYMENT (\$) 470.00				Attorney Docket 3135 - 011614					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINATION FEES									
Small Entity Small En						mall Entity			
Application Ty		Fee (\$)		e (\$)	Fee (\$)	Fee (\$)	Fe	es Paid (\$)	
Utility	330	82		270	220	110		······································	
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85		·	
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity									
Fee Description Fee (\$)								<u>Fee (\$)</u>	
Each claim over 20 (including Reissues) 52 26									
Each independent claim over 3 (including Reissues) 220 110									
Multiple dependent							390	195	
Total Claims	<u>- 20 or HP</u>	Extra Clair)	Fee Paid (\$)			e Dependent Claims	
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims	-3 or HP	Extra Clair			Fee Paid (\$)		***************************************		
HP = highest number	of independent clair		eater than 3.						
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under									
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1-month Petition for Extension, Request for Continued Examination \$405 + 65									
SUBMITTED BY /									
# 100 mm and an		_		Reg	istration No.		m 1 1		
Signature (Attorney/Agent) 34,219 Telephone 412-471-8815									
Name (Print/Type)	John W. M	[cIlvaine					Date J	uly 22, 2009	